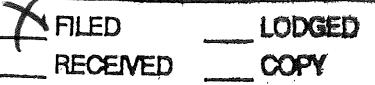


UNITED STATES DISTRICT COURT

for the

District of Arizona

Phoenix Division


APR 13 2022
CLERK U S DISTRICT COURT
DISTRICT OF ARIZONA
BY SMA DEPUTY

JONATHAN MOLINA

Case No.

CV-22-00609-PHX-DJH

(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

UNITED WAY OF PINAL COUNTY INC

Jury Trial: (check one) Yes No*Defendant(s)*

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

COMPLAINT FOR EMPLOYMENT DISCRIMINATION**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	JONATHAN MOLINA
Street Address	1583 E GABRILLA DR
City and County	CASA GRANDE, PINAL COUNTY
State and Zip Code	ARIZONA, 85122
Telephone Number	520-222-7534
E-mail Address	JMPROSERVICES@GMAIL.COM

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

Defendant No. 1

Name	UNITED WAY OF PINAL COUNTY INC
Job or Title (<i>if known</i>)	
Street Address	1269 N PROMENADE PARKWAY, SUITE 104
City and County	CASA GRANDE, PINAL COUNTY
State and Zip Code	ARIZONA, 85194
Telephone Number	(520) 836-0736
E-mail Address (<i>if known</i>)	ap@unitedwayofpc.org

Defendant No. 2

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 3

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

Defendant No. 4

Name	
Job or Title (<i>if known</i>)	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address (<i>if known</i>)	

C. Place of Employment

The address at which I sought employment or was employed by the defendant(s) is

Name	UNITED WAY OF PINAL COUNTY INC
Street Address	1269 N PROMENADE PARKWAY, SUITE 104
City and County	CASA GRANDE, PINAL COUNTY
State and Zip Code	ARIZONA, 85194
Telephone Number	(520) 836-0736

II. Basis for Jurisdiction

This action is brought for discrimination in employment pursuant to (*check all that apply*):



Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)



Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)



Other federal law (*specify the federal law*):



Relevant state law (*specify, if known*):



Relevant city or county law (*specify, if known*):

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):

<input type="checkbox"/>	Failure to hire me.
<input checked="" type="checkbox"/>	Termination of my employment.
<input type="checkbox"/>	Failure to promote me.
<input type="checkbox"/>	Failure to accommodate my disability.
<input checked="" type="checkbox"/>	Unequal terms and conditions of my employment.
<input checked="" type="checkbox"/>	Retaliation.
<input type="checkbox"/>	Other acts (<i>specify</i>): _____

(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)

B. It is my best recollection that the alleged discriminatory acts occurred on date(s)
Between February 6th, 2020 and May 27th, 2021, nearly every single work day.C. I believe that defendant(s) (*check one*):

<input checked="" type="checkbox"/>	is/are still committing these acts against me.
<input type="checkbox"/>	is/are not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):

<input checked="" type="checkbox"/>	race	Mexican
<input type="checkbox"/>	color	_____
<input checked="" type="checkbox"/>	gender/sex	Male
<input type="checkbox"/>	religion	_____
<input checked="" type="checkbox"/>	national origin	Mexican Nationality
<input type="checkbox"/>	age (year of birth)	_____ (<i>only when asserting a claim of age discrimination</i> .)
<input checked="" type="checkbox"/>	disability or perceived disability (<i>specify disability</i>)	_____
	Allergies to chemical aerosols	_____

E. The facts of my case are as follows. Attach additional pages if needed.

I was initially hired as an independent contractor when everyone else was hired as an employee yet I was prevented from hiring anyone and was required to attend regular employee meetings. I did not receive stipends or mileage allowances while others did or corporate policy dictated that I should. I was yelled at, harassed, and scolded and my complaints were ignored and ridiculed. I was constantly reminded that immigrants were a problem by the CEO. Racist comments were made towards my wife who is also Mexican and lives in Mexico. My allergies to chemical aerosols were disclosed by the CEO when I asked to keep it confidential. Knowledge of my allergies were then used to continuously attack and ridicule me. I was laid off on May 27th, 2021, the same day I was to begin my FMLA leave to care for ~~my wife and newborn baby. EEOC documents are attached~~ my wife and newborn baby. EEOC documents are attached.

(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)

IV. Exhaustion of Federal Administrative Remedies

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on *(date)*

December 14th, 2021

B. The Equal Employment Opportunity Commission *(check one):*



has not issued a Notice of Right to Sue letter.



issued a Notice of Right to Sue letter, which I received on *(date)* 01/14/2022.

(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)

C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct *(check one):*



60 days or more have elapsed.



less than 60 days have elapsed.

V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

The damages I seek are for: misclassification of employee as self employed to evade taxes and employee protections \$5000; vehicle allowances \$3300; accrued paid time off \$2340; stipends not paid \$3500; discrimination, disclosure of disability, and other EEOC charges \$100,000; lost wages \$150,000; punitive/exemplary damages \$1,000,000. I believe that I am not the first to be discriminated and harassed by the current CEO of United Way of Pinal County (UWPC) and several good employees of UWPC were pushed out because of his harassment. I feel that I am still being wronged because in a small claims lawsuit that I recently filed, I was ignored when trying to follow court procedure to exchange evidence with UWPC and the CEO made false statements to the court that created a new burden for me which forced me to drop the case. I will continue to ~~feel wronged until I see justice~~ feel wronged until I see justice.

VI. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 04/13/2022

Signature of Plaintiff

JONATHAN MOLINA



Printed Name of Plaintiff

JONATHAN MOLINA

B. For Attorneys

Date of signing: _____

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: Jonathan Molina
1583 E Gabrilla Dr
Casa Grande, AZ 85122

From: Phoenix District Office
3300 North Central Ave
Suite 690
Phoenix, AZ 85012



*On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))*

EEOC Charge No.

EEOC Representative

Telephone No.

540-2022-00738

**Anick Flores,
Supervisory Investigator**

(602) 661-0004

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

- The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.
- Your allegations did not involve a disability as defined by the Americans With Disabilities Act.
- The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.
- Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge.
- The EEOC issues the following determination: The EEOC will not proceed further with its investigation, and makes no determination about whether further investigation would establish violations of the statute. This does not mean the claims have no merit. This determination does not certify that the respondent is in compliance with the statutes. The EEOC makes no finding as to the merits of any other issues that might be construed as having been raised by this charge.
- The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.
- Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible**.

On behalf of the Commission



01/14/2022

Enclosures(s)

**Melinda Caraballo,
Acting District Director**

(Date Issued)

cc:

**Allen Villalobos
Chief Executive Officer
UNITED WAY OF PINAL COUNTY, INC.
PO BOX 10541
Casa Grande, AZ 85130**

INFORMATION RELATED TO FILING SUIT UNDER THE LAWS ENFORCED BY THE EEOC

*(This information relates to filing suit in Federal or State court under Federal law.
If you also plan to sue claiming violations of State law, please be aware that time limits and other
provisions of State law may be shorter or more limited than those described below.)*

PRIVATE SUIT RIGHTS -- Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA), the Genetic Information Nondiscrimination Act (GINA), or the Age Discrimination in Employment Act (ADEA):

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge **within 90 days of the date you receive this Notice**. Therefore, you should **keep a record of this date**. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope or record of receipt, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed **within 90 days of the date this Notice was issued to you** (as indicated where the Notice is signed) or the date of the postmark or record of receipt, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred **more than 2 years (3 years) before you file suit** may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit **before 7/1/10 – not 12/1/10** – in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice **and** within the 2- or 3-year EPA back pay recovery period.

ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do **not** relieve you of the requirement to bring suit within 90 days.

ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, **please make your review request within 6 months of this Notice**. (Before filing suit, any request should be made within the next 90 days.)

IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.

NOTICE OF RIGHTS UNDER THE ADA AMENDMENTS ACT OF 2008 (ADAAA): The ADA was amended, effective January 1, 2009, to broaden the definitions of disability to make it easier for individuals to be covered under the ADA/ADAAA. A disability is still defined as (1) a physical or mental impairment that substantially limits one or more major life activities (actual disability); (2) a record of a substantially limiting impairment; or (3) being regarded as having a disability. *However, these terms are redefined, and it is easier to be covered under the new law.*

If you plan to retain an attorney to assist you with your ADA claim, we recommend that you share this information with your attorney and suggest that he or she consult the amended regulations and appendix, and other ADA related publications, available at http://www.eeoc.gov/laws/types/disability_regulations.cfm.

“Actual” disability or a “record of” a disability (note: if you are pursuing a failure to accommodate claim you must meet the standards for either “actual” or “record of” a disability):

- The limitations from the impairment no longer have to be severe or significant for the impairment to be considered substantially limiting.
- In addition to activities such as performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, thinking, concentrating, reading, bending, and communicating (more examples at 29 C.F.R. § 1630.2(i)), “major life activities” now include the operation of major bodily functions, such as: functions of the immune system, special sense organs and skin; normal cell growth; and digestive, genitourinary, bowel, bladder, neurological, brain, respiratory, circulatory, cardiovascular, endocrine, hemic, lymphatic, musculoskeletal, and reproductive functions; or the operation of an individual organ within a body system.
- Only one major life activity need be substantially limited.
- With the exception of ordinary eyeglasses or contact lenses, the beneficial effects of “mitigating measures” (e.g., hearing aid, prosthesis, medication, therapy, behavioral modifications) are not considered in determining if the impairment substantially limits a major life activity.
- An impairment that is “episodic” (e.g., epilepsy, depression, multiple sclerosis) or “in remission” (e.g., cancer) is a disability if it would be substantially limiting when active.
- An impairment may be substantially limiting even though it lasts or is expected to last fewer than six months.

“Regarded as” coverage:

- An individual can meet the definition of disability if an employment action was taken because of an actual or perceived impairment (e.g., refusal to hire, demotion, placement on involuntary leave, termination, exclusion for failure to meet a qualification standard, harassment, or denial of any other term, condition, or privilege of employment).
- “Regarded as” coverage under the ADAAA no longer requires that an impairment be substantially limiting, or that the employer perceives the impairment to be substantially limiting.
- The employer has a defense against a “regarded as” claim only when the impairment at issue is objectively BOTH transitory (lasting or expected to last six months or less) AND minor.
- A person is not able to bring a failure to accommodate claim if the individual is covered only under the “regarded as” definition of “disability.”

Note: *Although the amended ADA states that the definition of disability “shall be construed broadly” and “should not demand extensive analysis,” some courts require specificity in the complaint explaining how an impairment substantially limits a major life activity or what facts indicate the challenged employment action was because of the impairment. Beyond the initial pleading stage, some courts will require specific evidence to establish disability.* For more information, consult the amended regulations and appendix, as well as explanatory publications, available at http://www.eeoc.gov/laws/types/disability_regulations.cfm.

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION		Charge Presented To: Agency(ies) Charge No(s):	
<small>This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.</small>		<input type="checkbox"/> FEPA	Agency(ies) Charge No(s):
		<input checked="" type="checkbox"/> EEOC	540-2022-00738
Arizona Attorney General's Office, Civil Rights Division			
<small>State or local Agency, if any</small>			
Name (Indicate Mr., Ms., Mrs.) Mr. Jonathan Molina		Home Phone (Incl. Area Code) (520) 222-7534	Date of Birth 03/13/1989
Street Address 1583 E Gabrilla Dr, Casa Grande, AZ 85122		City, State and ZIP Code	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name UNITED WAY OF PINAL COUNTY INC		No. Employees, Members Under 15	Phone No. (Include Area Code) (520) 836-0736
Street Address PO BOX 10541, Casa Grande, AZ 85130		City, State and ZIP Code	
Name		No. Employees, Members	Phone No. (Include Area Code)
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).)			
<input checked="" type="checkbox"/> RACE <input type="checkbox"/> COLOR <input checked="" type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input checked="" type="checkbox"/> NATIONAL ORIGIN <input checked="" type="checkbox"/> RETALIATION <input type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)			
DATE(S) DISCRIMINATION TOOK PLACE Earliest 10/13/2020 Latest 05-27-2021			
<input type="checkbox"/> CONTINUING ACTION			
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p>On or about October 13, 2020 I was hired by the above-mentioned employer. My most recent position was Program Manager.</p> <p>On or around October 2020, I informed my Director that I believed I was being treated differently by the Office Manager because I am a male, and advised him that I was told "I am not taking any of your fucking shit and you better wipe down anything you fucking touch because I have an elderly person that lives with me and do not want them to get COVID-19". The Director laughed at my complaint and said "I'm just going to pretend I didn't hear that." The Office Manager also made hand gestures towards me, indicating that she was going to strangle me. I never saw the Office Manager treat any of the women that came into the office this way.</p> <p>On or around March 2021, I informed my Director of my disability and that the constant use of disinfectants</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY – When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT 	
Dec 14, 2021		SUBSCRIBED AND SWEORN TO BEFORE ME THIS DATE <small>(month, day, year)</small>	
Date Dec 14, 2021		Charging Party Signature	

EEOC Form 8 (11/06)

CHARGE OF DISCRIMINATION		Charge Presented To:	Agency(ies) Charge No(s):
This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		<input type="checkbox"/> FEPA	
		<input checked="" type="checkbox"/> EEOC	540-2022-00738
Arizona Attorney General's Office, Civil Rights Division		and EEOC	
State or local Agency, if any			

was causing a negative effect on my disability. I asked that my Director keep this information confidential. Shortly after this request was made, our Office Manager repeatedly made comments that she was only going to use a small amount of disinfectant, and when visitors entered the office, she notified them of my disability. It is my belief that the Director disclosed my confidential medical information.

Between October 2020 and March 2021, my Director made racist comments regarding my wife who is a Mexican National, by telling me "why don't you tell your wife to get with the migrant caravans coming across the border".

Furthermore, during several casual conversations, my Director would make comments, including but not limited to, "the problem with immigrants is that they don't want to be socially integrated and they needed to socially assimilate", "President Trump is great" "the United States is the greatest country in the world", "systemic racism didn't exist", and "President Biden is going to turn the United States socialist".

On or about May 27, 2021, I was terminated. I believe I was terminated in retaliation for my complaint about being discriminated against because I am a male and because of my disability.

I believe I have been discriminated against because of my gender (male), my National Origin (Hispanic), and retaliated against because I engaged in protected activity in violation of Title VII of the Civil Rights Act of 1964 (Title VII), as amended; and because of my disability, and retaliated against because I engaged in protected activity in violation of the Americans with Disabilities Act of 1990 (ADA), as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	NOTARY - When necessary for State and Local Agency Requirements
I declare under penalty of perjury that the above is true and correct.	I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT
Dec 14, 2021 Date	 Charging Party Signature
SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	